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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for nple, your driver's use or passport).	Marinela First name  E.  Middle name	First name  Middle name
	iden	g your picture tification to your ting with the trustee.	Villejo Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-5214	

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Case number (if known)

Debtor 1 Marinela E. Villejo

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ☐ I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years **DBA MP Healthcare Consulting** Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 931 Quince Ct. Mount Prospect, IL 60056 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Marinela E. Villejo

art	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notic</i> f page 1 and check		I by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy oriate box.	•
	choosing to file under	☐ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		<b>■</b> C	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	oically, if you are pa	aying the fee	check with the clerk's office in your local court for more deta e yourself, you may pay with cash, cashier's check, or mor behalf, your attorney may pay with a credit card or check w	ney
							option, sign and attach the Application for Individuals to Pa	У
			ŭ		's (Official Form 10 <b>sived</b> (You may re	,	ption only if you are filing for Chapter 7. By law, a judge ma	av/
			but is not requapplies to you	uired to, waive ur family size ar	your fee, and may nd you are unable	do so only if to pay the fe	if your income is less than 150% of the official poverty line ee in installments). If you choose this option, you must fill of Official Form 103B) and file it with your petition.	that
).	Have you filed for bankruptcy within the	■ No						
	last 8 years?	□ Ye						
			District				Case number	
			District			hen	Case number	
			District		W	hen	Case number	
10.	Are any bankruptcy cases pending or being	■ No	 D					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	<b>∋</b> s.					
			Debtor				Relationship to you	
			District		W	hen	Case number, if known	
			Debtor				Relationship to you	
			District		W	hen	Case number, if known	
11.	Do you rent your	□ No	o. Go to li	ne 12.				
	residence?	■ Ye	es. Has yo	ur landlord obta	ained an eviction ju	ıdgment aga	ainst you and do you want to stay in your residence?	
				No. Go to line	12.			
			_	Yes. Fill out <i>In</i> bankruptcy pe		out an Evictio	ion Judgment Against You (Form 101A) and file it with this	

Document Page 4 of 58 Case number (if known) Marinela E. Villejo Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as MP Healthcare Consulting an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC 931 Quince Ct. If you have more than one Mount Prospect, IL 60056 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed.

or a building that needs urgent repairs?

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Debtor 1 Marinela E. Villejo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Marinela E. Villejo	)		Case num	ber (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.			efined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busin	ess debts			
17.	Are you filing under Chapter 7?	e Questions for Reporting Purposes s do  16a. Are your debts primarily consumer debts? Consumer individual primarily for a personal, family, or household primarily for a personal, family, or household primarily business debts? Business of money for a business or investment or through the operation in No. Go to line 17.  16b. Are your debts primarily business debts? Business of money for a business or investment or through the operation in No. Go to line 16c.    Yes. Go to line 17.	er 7. Go to line 18.					
	Do you estimate that after any exempt	☐ Yes.	I am filing under Chapter 7 are paid that funds will be	. Do you estimate that after any exempt pro available to distribute to unsecured creditor	operty is excluded and administrative expenses rs?			
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for							
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>1</b> 1 10		П 1 000-5 000	□ 25,001-50,000			
	you estimate that you owe?		1		☐ 50,001-100,000			
				□ 10,001-25,000	☐ More than100,000			
19.	How much do you	<b>\$0 - \$</b>	.50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?			□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
				☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	\$50,0	)01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
				☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t7: Sign Below							
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt	cy case can result in fines u					
		Marinel	a E. Villejo	Signature of Deb	otor 2			
		Executed	d on July 28, 2017	Executed on				
			MM / DD / YYYY	N	IM / DD / YYYY			

Debtor 1 Marinela E. Villejo

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher N. Ackeret	Date	July 28, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Christopher N. Ackeret Printed name		
Debt & Injury Law Center, LLC Firm name		
120 S. State #400 Chicago, IL 60603		
Number, Street, City, State & ZIP Code		
Contact phone (224) 789-8529	Email address	chris@debtandinjurylaw.com
6280770		
Bar number & State		

Spouse if, filing) First Name Middle Name Last Name	Debtor 1	Marinela E. Villejo		
Spouse if, filing) First Name Middle Name Last Name		First Name	Middle Name	Last Name
······································	Debtor 2			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	Spouse if, filing)	First Name	Middle Name	Last Name
	Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
	Case number <sub>-</sub>			

## amended filing

#### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

☐ Check if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,429.65
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,429.65
Par	2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	56,399.93
	Your total liabilities	\$	61,399.93
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	12,166.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,014.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	0.200.40
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$ 9,396.42

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	5,000.00

Page 10 of 58 Document Fill in this information to identify your case and this filing: Debtor 1 Marinela E. Villejo Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$1,500.00 Bed, housewares

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

Document Page 11 of 58 Case number (if known) Debtor 1 Marinela E. Villejo \$1,000.00 Work laptop, tv 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe..... \$600.00 Necessary clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$200.00 Costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$0.00 Dog 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No  $\square$  Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,300.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

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Document Debtor 1 Marinela E. Villejo

				Cash	\$60.00
17	institutions.	avings, or other financial acco		t; shares in credit unions, brokerage housest each.	ses, and other similar
	□ No ■ Yes		Institution name:		
		17.1. Checking	Chase		\$1,069.65
18	Examples: Bond funds	or publicly traded stocks , investment accounts with bro	okerage firms, money mark	et accounts	
	■ No □ Yes	Institution or issuer	name:		
19				d businesses, including an interest in	an LLC, partnership, and
	☐ Yes. Give specific inf	formation about them Name of entity:		% of ownership:	
20	Negotiable instruments	orate bonds and other nego s include personal checks, cas nents are those you cannot tra	shiers' checks, promissory r	notes, and money orders.	
	■ No □ Yes. Give specific info	ormation about them Issuer name:			
21	. Retirement or pension  Examples: Interests in  No		03(b), thrift savings accour	nts, or other pension or profit-sharing plar	ns
	☐ Yes. List each accour	nt separately. Type of account:	Institution name:		
22		ed deposits you have made so		vice or use from a company , water), telecommunications companies	, or others
	■ Yes		Institution name or i	ndividual:	
		Security Deposit	Landlord		\$2,000.00
23	. Annuities (A contract for	or a periodic payment of mone	ey to you, either for life or fo	or a number of years)	
	■ No □ Yes Is	suer name and description.			
24	26 U.S.C. §§ 530(b)(1),		ualified ABLE program, o	r under a qualified state tuition progra	ım.
	■ No □ Yes In	nstitution name and description	n. Separately file the record	s of any interests.11 U.S.C. § 521(c):	
25	•	ture interests in property (o	ther than anything listed	in line 1), and rights or powers exerci	sable for your benefit
	■ No □ Yes. Give specific inf	formation about them			
26	Examples: Internet don	rademarks, trade secrets, an main names, websites, procee			
	■ No □ Yes. Give specific inf	formation about them			

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D	ebtor 1	Marinela E.	Villejo		Document	Case number (if known)	
27	Examp  ■ No	es, franchises, les: Building pe Give specific in	ermits, exclu	sive licenses,		n holdings, liquor licenses, professional licens	es
M	loney or p	property owed	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	unds owed to	-	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
29	■ No		·	7. 1	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30	Examp		ges, disabilit npaid loans	ty insurance p	payments, disability ben someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
31	Examp  ■ No		ability, or life		nealth savings account (l	HSA); credit, homeowner's, or renter's insurar Beneficiary:	nce Surrender or refund value:
32	If you a someo		ary of a living		someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
33	Examp  ■ No		employmen		you have filed a lawsui surance claims, or rights	it or made a demand for payment s to sue	
34	■ No	ontingent and Describe each	-	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
35	■ No	ancial assets y		already list			
3					om Part 4, including a	ny entries for pages you have attached	\$3,129.65
P	art 5: Des	scribe Any Busin	ness-Related	Property You	Own or Have an Interest I	In. List any real estate in Part 1.	
37	Do you o	-	legal or equi	table interest	in any business-related p	roperty?	
	_	o to line 38.					

Official Form 106A/B Schedule A/B: Property page 4

Case 17-22519 Doc 1 Filed 07/28/17 Entered 07/28/17 14:34:19 Desc Main Document Page 14 of 58 Case number (if known) Debtor 1 Marinela E. Villejo Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$3,300.00 Part 4: Total financial assets, line 36 58. \$3,129.65 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$6,429.65 Copy personal property total \$6,429.65

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$6,429.65

Fill in this infor	rmation to identify your	case:		
Debtor 1	Marinela E. Villej	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify t	the Property	You Claim :	as Exempt
---------	------------	--------------	-------------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Bed, housewares Line from Schedule A/B: 6.1	\$1,500.00	•	\$1,000.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale 74 b. G. I			100% of fair market value, up to any applicable statutory limit	
Work laptop, tv Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line Ironi Scredule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
Necessary clothing Line from Schedule A/B: 11.1	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
Ellic Holli Genedale 742. TTT			100% of fair market value, up to any applicable statutory limit	
Dog Line from Schedule A/B: 13.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
Line Holli Golleddie PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$60.00	•	\$60.00	735 ILCS 5/12-1001(b)
Line IIOIII Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	

Document Page 16 of 58 Marinela E. Villejo Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Chase** 735 ILCS 5/12-1001(b) \$440.00 \$1,069.65 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Security Deposit: Landlord** 735 ILCS 5/12-1001(b) \$1,500.00 \$2,000.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Entered 07/28/17 14:34:19

Desc Main

Filed 07/28/17

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Case 17-22519

Doc 1

Fill in this infor	mation to identify your	case:		
Debtor 1	Marinela E. Villejo	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

		Documen	t Page	2 18 of 5	58		
Fill in th	nis information to identify your o	case:					
Debtor 1	Marinela E. Villejo	)					
	First Name	Middle Name	Last Nam	ie			
Debtor 2 (Spouse if,		Middle Name	Last Nam	ie			
	States Bankruptcy Court for the:	NORTHERN DISTRICT O	E ILLINOIS				
Officed S	states bankruptcy Court for the.	NORTHERN DISTRICT O	T ILLINOIS				
Case nu	umber					Charle	if their in one
(II KIIOWII)						_	if this is an led filing
Officia	al Form 106E/F						
	dule E/F: Creditors W	ho Have Unsecur	ed Claim	S			12/15
ny execu Schedule Schedule eft. Attac	nplete and accurate as possible. Us utory contracts or unexpired leases G: Executory Contracts and Unexpire. D: Creditors Who Have Claims Secth the Continuation Page to this page to case number (if known).  List All of Your PRIORITY Un	that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more space. If you have no information to	Also list execute G). Do not incl ce is needed, co	ory contract ude any cre opy the Part	s on Schedule A/B: I ditors with partially s you need, fill it out,	Property (Official For secured claims that a number the entries in	m 106A/B) and on are listed in n the boxes on the
	iny creditors have priority unsecured						
_	lo. Go to Part 2.						
<b>■</b> Y	es.						
ident possi Part	all of your priority unsecured claims if what type of claim it is. If a claim ha ible, list the claims in alphabetical orde 1. If more than one creditor holds a pa an explanation of each type of claim, s	s both priority and nonpriority are according to the creditor's nan rticular claim, list the other credi	mounts, list that ne. If you have r tors in Part 3.	claim here and an area of the control of the contro	nd show both priority a	nd nonpriority amoun	ts. As much as
2.1	Internal Payanua Carvica	Last 4 digits of a	accunt number		¢5 000 00	amount \$5,000,00	amount \$0.00
	Internal Revenue Service Priority Creditor's Name	Last 4 digits of a	ccount number		\$5,000.00	\$5,000.00	. <del> </del>
	Mail Stop 5010 CHI 230 S. Dearborn Street Chicago, IL 60604	When was the de		2015		-	
	Number Street City State Zlp Code to incurred the debt? Check one.	As of the date yo ☐ Contingent	u file, the claim	is: Check a	ii that apply		
_	Debtor 1 only	☐ Unliquidated					
_	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORIT	Y unsecured cl	aim:			
_	At least one of the debtors and anothe	Пъ					
	Check if this claim is for a commun	<u> </u>		vou owo tho	govornment		
	he claim subject to offset?	☐ Claims for dea		•	•		
		☐ Other. Specify	,	, , ,			
	Yes		Taxes 201	5			
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims					
	ny creditors have nonpriority unsec						
_	lo. You have nothing to report in this pa		with your other	schedules.			
<b>■</b> Y	es.						
	all of your nonpriority unsecured claim, list the creditor separately						

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Case number (if know)

4.1 Ally Financial Last 4 digits of account number 1336 \$3,192.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2014 PO Box 380901 **Bloomington, MN 55438** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Vehicle Deficiency Other. Specify 4.2 **American Express** Last 4 digits of account number 9483 \$3,767.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2012 PO Box 981537 El Paso, TX 79998-1537 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit card** Other. Specify 4.3 **AT&T Mobility** \$1,968.32 Last 4 digits of account number 3156 Nonpriority Creditor's Name 1801 Valley View Lane When was the debt incurred? 2016 Dallas, TX 75234-8906 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Cellular phone ☐ Yes

Debtor 1 Marinela E. Villejo

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Debtor 1 Marinela E. Villejo Case number (if know) 4.4 ATI Physical Therapy Last 4 digits of account number \$296.80 Nonpriority Creditor's Name 790 Remington Blvd When was the debt incurred? 2014 Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.5 **Capital One** Last 4 digits of account number 4519 \$1,275.00 Nonpriority Creditor's Name PO Box 30285 When was the debt incurred? 2016 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit card** Other. Specify 4.6 **Cavalry Portfolio Services** Last 4 digits of account number \$2,883.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2015 500 Summit Lake Dr., Suite 400 Valhalla, NY 10595-1340 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Consumer credit ☐ Yes

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Marineia E. Villejo	Case number (if know)	
Cavalry Portfolio Services	Last 4 digits of account number	\$4,741.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 500 Summit Lake Dr., Suite 400 Valhalla, NY 10595-1340	When was the debt incurred? 2016	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card	
Cavalry Portfolio Services	Last 4 digits of account number	\$5,603.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 500 Summit Lake Dr., Suite 400 Valhalla, NY 10595-1340	When was the debt incurred? 2016	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card	
Comcast	Last 4 digits of account number	\$261.69
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 3001	When was the debt incurred? 2016	Ψ201.03
Southeastern, PA 19398-3001  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Utility	

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Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes

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Marinela E. Villejo	Case number (if know)	
Leone Dermatology Center	Last 4 digits of account number 1974	\$73.8
Nonpriority Creditor's Name 3060 N. Arlington Heights Rd.	When was the debt incurred? 2016	
Arlington Heights, IL 60004  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical	
Medco Financial Assoc.	Last 4 digits of account number	\$97.6
Nonpriority Creditor's Name	<del></del>	<u> </u>
Attn: Bankruptcy Dept. PO Box 525	When was the debt incurred? 2015	
Gurnee, IL 60031-0525  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's. Officer an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
Midland Funding LLC	Last 4 digits of account number	\$312.0
Nonpriority Creditor's Name 2365 Northside Drive, Suite 300	When was the debt incurred? 2015	•
San Diego, CA 92108  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	76 of the date you me, the claim is: offeen all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	

Document Page 24 of 58 Debtor 1 Marinela E. Villejo Case number (if know) 4.1 MiraMed Revenue Group, LLC \$171.61 Last 4 digits of account number 6 Nonpriority Creditor's Name Dept 77304 2015 When was the debt incurred? PO Box 77000 Detroit, MI 48277-0304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical 4.1 **Navient** 0220 \$30,074.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9500 2002 When was the debt incurred? Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Student loans ☐ Yes 4.1 NCO Fin/99 \$438.93 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 15630 When was the debt incurred? 2014 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

Other. Specify Consumer

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

	000017 22010 2001 1	Document Page 2	5 of 58	iani
Debt	or 1 Marinela E. Villejo	——————————————————————————————————————	Case number (if know)	
4.1 9	Take Care Health Systems	Last 4 digits of account number	2469	\$569.96
	Nonpriority Creditor's Name 1901 E. Voorhees Danville, IL 61832	When was the debt incurred?	2014	
	Number Street City State Zlp Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	US Bank National Trust Association	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 300 E. Delaware Ave., 8th Floor	When was the debt incurred?	2015	
	Wilmington, DE 19809  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other Specify Mortgage n	ote deficiency; notice only	
4.2	Womancare PC	Last 4 digits of account number		\$73.23
	Nonpriority Creditor's Name PO Box 4543	When was the debt incurred?	2014	•
	Carol Stream, IL 60197			
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

■ No

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-22519 Doc 1 Filed 07/28/17 Entered 07/28/17 14:34:19 Desc Main Document Page 26 of 58 Case number (if know) Debtor 1 Marinela E. Villejo **AFNI** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 3517 Bloomington, IL 61702 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address ATI Physical Therapy Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 790 Remington Blvd Part 2: Creditors with Nonpriority Unsecured Claims Bolingbrook, IL 60440 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave. ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave. ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comcast - Indiana address Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 919 E. Winona Ave., Ste. 1 Part 2: Creditors with Nonpriority Unsecured Claims Warsaw, IN 46580 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Contract Callers, Inc. Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 1058 Claussen Road, Ste. 110 Augusta, GA 30907 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Convergent Outsourcing** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 800 SW 39th St. ■ Part 2: Creditors with Nonpriority Unsecured Claims Renton, WA 98057 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Credence Resource Management Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 17000 Dallas Pkwy Suite 204 Part 2: Creditors with Nonpriority Unsecured Claims Dallas, TX 75248 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Firstsource Advantage, LLC Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 205 Bryant Woods South Buffalo, NY 14228 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **IC System** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 444 Highway 96 East, Part 2: Creditors with Nonpriority Unsecured Claims PO Box 64437 Saint Paul, MN 55164-0437 Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Chicago, IL 60606

Johnson, Blumberg & Assoc.

230 W. Monroe, Suite 1125

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Marineia E. Villejo		Case number (if know)
Massage Envy 728 E Dundee Rd. Palatine, IL 60074	Line <b>4.18</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	•
Northland Group, Inc.	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 390905 Mail Code F2B64 Minneapolis, MN 55439		Part 2: Creditors with Nonpriority Unsecured Claims
minicapons, mix 33433	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Northwest Community Hospital	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
800 W. Central Rd.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Arlington Heights, IL 60005	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Springleaf Financial Services	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 59 Evansville, IN 47701		■ Part 2: Creditors with Nonpriority Unsecured Claims
Evalisville, iiv 4/701	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
SYNCB/Amazon	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 965015 Orlando, FL 32896		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,000.00
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	56,399.93
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	56,399.93

			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Marinela E. Villej	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Karen Ptasnik
931 Quince
Mount Prospect, IL 60056

State what the contract or lease is for
House Lease, expires 12/17

		Docume	<u>nt Page 29 d</u>	of 58	
Fill in this	information to identify your	case:			
Debtor 1	Marinela E. Villejo	Middle Name	Last Name		
Debtor 2	i not reame	Wildale Name	Last Name		
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	oor				
(if known)				☐ Check if this is ar	n
				amended filing	•
Official	Form 106H				
		-1-4			
<u>Scnea</u>	ule H: Your Cod	eptors		1	2/15
	and case number (if known) you have any codebtors? (If			as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana			y? (Community property states and territories including to and Wiscoppin)	е
Anzona	a, Calliornia, Idano, Louisiana	, Nevada, New Mexico, Pu	eno Rico, Texas, wash	ington, and wisconsin.)	
■ No.	Go to line 3.				
	. Did your spouse, former spor	use, or legal equivalent live	with you at the time?		
	. Dia your opouco, formor opo-	aco, or logar oquivalent live	mar you at the time.		
				if your spouse is filing with you. List the person	
				sure you have listed the creditor on Schedule D ( 96G). Use Schedule D, Schedule E/F, or Schedule	
	olumn 2.	Tronii 100E/1 ), or oched		ooj. Ose ochedule D, ochedule Di , or ochedule	0 10 1111
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
				Check all schedules that apply.	
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street	O	710.0		
(	City	State	ZIP Code		
				Пол. и в п	
3.2	Name			Schedule D, line	
r	INAITIO			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(	City	State	ZIP Code		

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Fill	in this information to identify your c	case:								
Del	otor 1 Marinela E.	Villejo			_					
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number nown)						mended ppleme	d filing nt showing p s of the follo		
	fficial Form 106l					MM	/ DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filir or spouse is not filing wi On the top of any addition	ng jointly, and your sp th you, do not include	oouse i e infori	is livin matior	ng with you n about yo	u, inclu ur spoi	de informa	tion abou space is	t your needed,
1.	Fill in your employment information.		Debtor 1			De	ebtor 2	or non-filin	g spouse	•
	If you have more than one job,	Empleyment status	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Consulting							
	Include part-time, seasonal, or self-employed work.	Employer's name	MP Healthcare Consulting							
	Occupation may include student or homemaker, if it applies.	Employer's address	931 Quince Mount Prospect,	IL 600	56					
		How long employed th	here? 3 years							
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	late you file this form. If $y$	you have nothing to rep	ort for	any lin	ne, write \$0	) in the s	space. Inclu	de your no	on-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all e	employ	ers for tha	t persor	on the line	s below. If	you need
					i	For Debto	r 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_		0.00	\$	N/A	· —
3.	Estimate and list monthly over	time pay.		3.	+\$_		0.00	+\$	N/A	<u>-</u>

Calculate gross Income. Add line 2 + line 3.

0.00

N/A

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Debtor 1		Marinela E. Villejo					Case number (if known)						
	Cop	y line 4 here		4.		For	Debtor 1	0.00		Debtor -filing s	pous	se /A	
5.		all payroll deducti	ions:										
J.	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, a Mandatory contr Voluntary contri	and Social Security deductions ributions for retirement plans ibutions for retirement plans ments of retirement fund loans	56 5k 50 50 56 5f 5g	b. c. d. e. f.	\$	0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$		N, N, N, N,	/A /A /A /A /A	
_	5h.	Other deduction			h.+	\$_		-00.0				/A	
6. 7.			tions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  y take-home pay. Subtract line 6 from line 4.	6. 7.		\$_ \$		0.00	\$_ \$			/ <u>A</u> /A	
8.	<b>List</b> 8a. 8b. 8c.	profession, or fa Attach a statement receipts, ordinary monthly net incont Interest and divi	n rental property and from operating a business, arm  nt for each property and business showing gross and necessary business expenses, and the total me.	8a 8t		\$_ \$_	12,166 0	5.00 0.00	\$_ \$_			/A /A	
		regularly received Include alimony,	e spousal support, child support, maintenance, divorce		•	\$			æ			/ A	
	8d.	Unemployment	roperty settlement. compensation	80 80		\$ _		0.00	\$_ \$			/ <u>A</u> /A	
	8e. 8f.	Social Security Other governme Include cash assi that you receive,	ent assistance that you regularly receive istance and the value (if known) of any non-cash assistance such as food stamps (benefits under the Supplemental nee Program) or housing subsidies.	86 e 8f		\$ \$	0	0.00	\$ \$		N	/A	
	8g.	Pension or retire		80		\$_		.00	\$			/A	
9.	8h. <b>Add</b>	Other monthly in	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— <sup>8r</sup> 9.	h.+ .	\$_ \$	12,166	0.00 6.00	+ \$_ [\$_			/A N/A	
10.			ome. Add line 7 + line 9. 0 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1	2,166.00	+ \$_		N/A	= \$	12	2,166.00
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00												
12.		e that amount on the	e last column of line 10 to the amount in line 11. The re- e Summary of Schedules and Statistical Summary of Certa							. 12.	\$_ Com		2,166.00
13.	Do y	you expect an incre	ease or decrease within the year after you file this form	1?							mon	thly	income
		Yes. Explain:	Debtor is self-employed consultant with 1099 in Debtor resumes work 8/7/2017 and will earn \$95 Schedule I is based upon this income rate. Incoreceives 1099 at year end.	.00 p	per	hou	r for appi	roxim	ately	ี 40 hoเ	ırs p	er w	reek.

Official Form 106I Schedule I: Your Income page 2

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E:II-	in this info	tion to identify	ur ossa			Ī					
		tion to identify yo	our case:								
Deb	tor 1	Marinela E. \	/illejo				k if this is: An amended filing				
Deb	tor 2						A supplement show	ving postpetition chapter			
(Spc	ouse, if filing)					13 expenses as of the following date:					
Unite	ed States Bankr	ruptcy Court for the	NORTH	ERN DISTRICT OF ILLING	OIS	1	MM / DD / YYYY				
	e number nown)										
Of	ficial Fo	rm 106J									
Sc	chedule	J: Your l	 Exper	ises				12/15			
Be a info nun	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	. If two married people ar ch another sheet to this							
Part 1.	Is this a join	ibe Your House nt case?	noia								
	■ No. Go to		in a senar	ate household?							
	□ 103. <b>D00</b>		ii a sepaii	ate nousenoid:							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.				
2.	Do you have	e dependents?	■ No								
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents	names.						☐ Yes			
								□ No □ Yes			
								□ No			
								☐ Yes			
								□ No			
								☐ Yes			
3.		enses include f people other tl	<b>.</b>	No							
		r people other ti d your depende		Yes							
Part	Estim	ate Your Ongoi	na Monthi	v Evnenses							
Esti	imate your ex	penses as of yo	our bankrı	uptcy filing date unless y y is filed. If this is a supp							
the		n assistance and		government assistance it cluded it on <i>Schedule I:</i> Y			Your exp	enses			
,511		<del></del> ,									
4.		or home owners and any rent for the		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		2,000.00			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a. \$		0.00			
	•	rty, homeowner's				4b. \$		0.00			
				ipkeep expenses		4c. \$		75.00			
5		owner's associat		dominium dues <b>our residence</b> , such as ho	me equity loops	4d. \$ 5. \$		0.00			
J.	AUGILIOITALI		anna IUI VC	zur realuellee, SUCD AS DOI	ne econy toans			11 1111			

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Debtor 1	Marinela E. Villejo	Case num	ber (if known)	
6. <b>Utili</b>	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.		70.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other. Specify:	6d.		0.00
	d and housekeeping supplies	7.	*	400.00
	dcare and children's education costs	7. 8.	\$	
		9.	·	0.00
	hing, laundry, and dry cleaning			200.00
	onal care products and services	10.	·	120.00
	ical and dental expenses	11.	\$	150.00
	sportation. Include gas, maintenance, bus or train fare.	12.	¢	150.00
	ot include car payments.		·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	ritable contributions and religious donations	14.	\$	0.00
5. <b>Ins</b> u				
	ot include insurance deducted from your pay or included in lines 4 or 20.		•	
	Life insurance	15a.		0.00
15b.	Health insurance	15b.	\$	114.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
6. <b>Tax</b>	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify: Estimated Federal Taxes	16.	\$	2,750.00
	Estimated State Taxes		\$	350.00
	allment or lease payments:		·	
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify: Student Loans	17b.		
				635.00
	Other. Specify:	17d.	<b>&gt;</b>	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	· -	
	er payments you make to support others who do not live with you.	40	\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			2.22
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	·	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. <b>O</b> th	er: Specify:	21.	+\$	0.00
	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	7,014.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	7,014.00
	, <u></u>			7,014.00
<ol><li>Calc</li></ol>	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	12,166.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,014.00
				<u> </u>
23c.	Subtract your monthly expenses from your monthly income.			F 450 00
	The result is your monthly net income.	23c.	\$	5,152.00
For e	rou expect an increase or decrease in your expenses within the year after yo xample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			ase or decrease because of a
ΠY				
<b>—</b> Ү	co. Laplain note.			

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Fill in this infor	mation to identify your	case.			
Debtor 1	Marinela E. Villejo	Middle Name	Last Name		
Debtor 2	riiotranio	Wildale Harrie	Lastivamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For					
<b>Declara</b> t	tion About a	ın Individual	Debtor's Sc	chedules	12/15
·	8 U.S.C. §§ 152, 1341, 1  In Below	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out b	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /e/ Ma	rinela E. Villejo		X		
Marine	ela E. Villejo ure of Debtor 1		Signature of	Debtor 2	
Date	July 28, 2017		Date		

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Filli	n this inform	ation to identify you	r case:								
Debt	tor 1	Marinela E. Ville	jo Middle Name	Last Name							
Debt	tor 2	T HSC NAME	Made Name	Last Hamo							
(Spou	se if, filing)	First Name	Middle Name	Last Name							
Unite	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS							
Case	e number										
(if kno	wn)				_	Check if this is an amended filing					
						amended ming					
∩ff	icial For	m 107									
			Affairs for Indivic	luale Filing for B	ankruntov	4/10					
Be as infori numb	s complete and mation. If mo	nd accurate as possi ore space is needed, ). Answer every que	ble. If two married people a attach a separate sheet to t stion.	re filing together, both are this form. On the top of any	equally responsible for su						
Part	1E Give Do	etails About Your Ma	rital Status and Where You	Lived Before							
1. \	What is your	current marital statu	s?								
	<ul><li>☐ Married</li><li>■ Not marr</li></ul>	ied									
2.	During the last 3 years, have you lived anywhere other than where you live now?										
ļ	□ No										
1	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there					
	214 S. Ferr Arlington F	nandez Heights, IL 60004	From-To: <b>2014-2015</b>	☐ Same as Debtor ′		☐ Same as Debtor 1 From-To:					
	■ No ■ Yes. Mal	es include Arizona, Ca	rer live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of	/ada, New Mexico, Puerto Ri							
rail	Explair	Title Sources of You	i ilicome								
I	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-	time activities.	endar years?					
	□ No										
	Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income	Gross income	Sources of income	Gross income					
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)					
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$86,403.00	☐ Wages, commissions, bonuses, tips						
			Operating a business		☐ Operating a business						

Document Page 36 of 58 Case number (if known) Debtor 1 Marinela E. Villejo Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$141,275.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$83,943.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For the calendar year before that: Unemployment \$2,974.00 (January 1 to December 31, 2015) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

**Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid

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Case number (if known) Document Debtor 1 Marinela E. Villejo

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Karen Ptasnik 931 Quince Mount Prospect, IL 60056	Monthly rent	\$6,000.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Rent to landlord
Within 1 year before you filed for k Insiders include your relatives; any g of which you are an officer, director, a business you operate as a sole pro alimony.	peneral partners; relatives of any ge person in control, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one fo
<ul><li>■ No</li><li>□ Yes. List all payments to an insi</li></ul>	ider			
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
insider? Include payments on debts guarante  □ No ■ Yes. List all payments to an insi	ů ,			
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Cornelio Villego 931 Quince Mount Prospect, IL 60056	2017	\$12,374.28	\$0.00	Debtor uses father's American Express card for business expenses and pays creditor monthly directly from her bank account.
Cornelio Villejo 931 Quince Mount Prospect, IL 60056	2017	\$1,063.00	\$0.00	Debtor pays minimum monthly payments on father's Sychrony credit card
Rory Villejo 931 Quince Ct Mount Prospect, IL 60056	2017	\$29,129.08	\$0.00	Debtor is authorized user on brother's Chase credit card. Debtor uses the card for business expenses and some personal expenses. Debtor pays creditor monthly directly from her bank account.
Part 4: Identify Legal Actions, Report  Mithin 1 year before you filed for k List all such matters, including perso modifications, and contract disputes.	nal injury cases, small claims action			
□ No ■ Yes. Fill in the details.				

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Case number (if known) Debtor 1 Marinela E. Villejo

	Case title Case number	Nature of the case	Court or agency	Status o	f the case
	Cavalry SPV I LLC vs. Marinela	Breach of contract	Circuit Court of Cook	■ Pend	ing
	Villejo 17 M3 3996		County, IL Municipal Department,	3rd ☐ On a	
	T7 W3 3990		District	□ Conc	luded
	Cavalry SPV I LLC vs. Marinela	Breach of contract	Circuit Court of Cook	■ Pend	ing
	Villejo 17 M3 2759		County, IL Municipal Department,	ПОпа	•
			District	□ Cond	luded
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, foreclosed	l, garnished, attac	hed, seized, or levied?
	Creditor Name and Address	<b>Describe the Property</b>		Date	Value of the
		Explain what happened	ı		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No  Yes. Fill in the details.		luding a bank or financial ins	stitution, set off ar	ny amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	S Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes		erty in the possession of an a	assignee for the b	enefit of creditors, a
	☐ Yes				
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value of more tl	han \$600 per pers	on?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift or cor		s or contributions with a tota	al value of more th	an \$600 to any charity?
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ı contributed	Dates you contributed	Value

Case 17-22519 Doc 1 Filed 07/28/17 Entered 07/28/17 14:34:19 Desc Main Document Page 39 of 58 Case number (if known) Debtor 1 Marinela E. Villejo Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П

Yes. Fill in the details. Description and value of any property Person Who Was Paid Date payment Amount of transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You **Debt & Injury Law Center, LLC** Attorney's fees \$925.00 and filing fees July 28, 2017 \$1,235.00 120 S. State St. Ste. 400 of \$310.00 Chicago, IL 60603 www.debtandinjurylaw.com Greenpath, Inc. Credit counseling July 26, 2017 \$25.00 38505 Country Club Drive Suite 210 Farmington, MI 48331 www.debtandinjurylaw.com

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

■ No
□ Yes. Fill in the details.

Person Who Was Paid

Person Who Was Paid

Address

Description and value of any property
transferred

Date payment
or transfer was
payment
made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Marinela E. Villejo Debtor 1

19.	beneficiary? (These are often called asset-prote		ly property to a	a seit-settie	ed trust or similar device	or which you	are a
	☐ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transf made	er was
Pa	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	t Boxes, and S	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial ac	counts or inst	ruments he	eld in your name, or for	your benefit, cl	osed,
	Include checking, savings, money market, or houses, pension funds, cooperatives, associated as a second cooperative cooperativ				it; shares in banks, cred	it unions, brok	erage
	No						
	Yes. Fill in the details.	4	T (		D-1	1 (1	
		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	before clo	alance sing or ransfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, a	ıny safe de	posit box or other depo	sitory for secu	rities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you st have it?	till
22.	Have you stored property in a storage unit or  ■ No □ Yes. Fill in the details.	place other than your	home within	1 year befo	re you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you si have it?	till
Pa	t 9: Identify Property You Hold or Control fo	,					
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing	for, or hold in	trust
	■ No						
	☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Pa	tt 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun				ous or
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	as defined under any e		law, wheth	er you now own, opera	te, or utilize it o	or used
	Hazardous material means anything an enviro		as a hazardou	s waste, ha	zardous substance, tox	ic substance,	

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Marinela E. Villejo

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	onmental law, if you it	Date of notice	
25.	Have you notified any governmental unit of	,				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	onmental law, if you it	Date of notice	
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any en	vironmental	l law? Include settlement	s and orders.	
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	f the case	Status of the case	
Par	11: Give Details About Your Business or	Connections to Any Business				
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have a	any of the fo	ollowing connections to a	any business?	
	■ A sole proprietor or self-employed in	n a trade, profession, or other activit	y, either full-	-time or part-time		
	☐ A member of a limited liability comp	any (LLC) or limited liability partners	ship (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exc	ecutive of a corporation				
	☐ An owner of at least 5% of the voting	g or equity securities of a corporatio	n			
	■ No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill	in the details below for each busine	ss.			
	Business Name Address	Describe the nature of the business		oloyer Identification num		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.  Dates business existed		
	MP Healthcare Consulting	Consulting	EIN:			
	931 Quince Ct. Mount Prospect, IL 60056	HRB Tax Group Inc.	Fron	<sup>n-To</sup> Present		
	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statemen	t to anyone a	about your business? In	clude all financial	
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Marinela E. Villejo

Marinela E. Villejo

Signature of Debtor 2

Signature of Debtor 1

Date

July 28, 2017

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

□ Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - (i) The payment of the advanced retainer benefits the client as it creates a commitment on behalf of Debt & Injury Law Center, LLC to perform the reasonable and necessary work to file the Chapter 13 Bankruptcy, including the preparation of the filing of the petition, representation at the 341 meeting, and representation at the confirmation hearing, and any subsequent continued confirmation hearing.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$925.00 toward the flat fee, leaving a balance due of \$3,075.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: July 28, 2017	<i>C</i> 1	ı ,	
Signed:			
/s/ Marinela E. Villejo		/s/ Christopher N. Ackeret	
Marinela E. Villejo		Christopher N. Ackeret 6280770	
		Attorney for the Debtor(s)	
Debtor(s)			
Do not sign this agreement if t	he amounts are	blank.	

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	e Marinela E. Villejo		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSAT			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in a	petition in bankruptc	y, or agreed to be paid	to me, for services rendered or to
				4,000.00
	Prior to the filing of this statement I have received		\$	925.00
	Balance Due		\$	3,075.00
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation	n with any other perso	n unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of the same of the compensation with a list of the names of the compensation with a list of			
6.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspe	cts of the bankruptcy	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering adb.</li> <li>b. Preparation and filing of any petition, schedules, statement oc.</li> <li>c. Representation of the debtor at the meeting of creditors and od.</li> <li>[Other provisions as needed]</li> <li>Representation provided pursuant to the Court</li> </ul>	f affairs and plan which confirmation hearing,	ch may be required; and any adjourned hea	
7.	By agreement with the debtor(s), the above-disclosed fee does n ${f Adversaries.}$	ot include the following	ng service:	
	CER	TIFICATION		
this	I certify that the foregoing is a complete statement of any agreer bankruptcy proceeding.	ment or arrangement f	or payment to me for r	epresentation of the debtor(s) in
	July 28, 2017	/s/ Christopher	N. Ackeret	
_	Date	Christopher N.	Ackeret 6280770	
		Signature of Attorn  Debt & Injury La		
		120 S. State #40		
		Chicago, IL 606	03	
			Fax: (312) 256-915	4
		(224) 789-8529 chris@debtand		4

Name of law firm

### United States Bankruptcy Court Northern District of Illinois

In re	Marinela E. Villejo		Case No.	
	•	Debtor(s)	Chapter 13	
	VER	RIFICATION OF CREDITOR MA	ΓRIX	
		Number of Co	reditors:	34
	The above-named Debtor(s) h (our) knowledge.	hereby verifies that the list of creditor	s is true and correct to th	e best of my
Date:	July 28, 2017	/s/ Marinela E. Villejo  Marinela E. Villejo  Signature of Debtor		

AFNI Attn: Bankruptcy Dept. PO Box 3517 Bloomington, IL 61702

Ally Financial Attn: Bankruptcy Dept. PO Box 380901 Bloomington, MN 55438

American Express Attn: Bankruptcy Dept. PO Box 981537 El Paso, TX 79998-1537

AT&T Mobility 1801 Valley View Lane Dallas, TX 75234-8906

ATI Physical Therapy 790 Remington Blvd Bolingbrook, IL 60440

Blitt & Gaines 661 Glenn Ave. Wheeling, IL 60090

Capital One PO Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Attn: Bankruptcy Dept. 500 Summit Lake Dr., Suite 400 Valhalla, NY 10595-1340

Comcast Attn: Bankruptcy Dept. PO Box 3001 Southeastern, PA 19398-3001

Comcast - Indiana address 919 E. Winona Ave., Ste. 1 Warsaw, IN 46580 ComEd Attn: Revenue Mangement BK Group 1919 Swift Drive Oak Brook, IL 60521

Contract Callers, Inc. Attn: Bankruptcy Dept. 1058 Claussen Road, Ste. 110 Augusta, GA 30907

Convergent Outsourcing 800 SW 39th St. Renton, WA 98057

Credence Resource Management 17000 Dallas Pkwy Suite 204 Dallas, TX 75248

Credit Collection Services Attn: Bankruptcy Dept. Two Wells Ave., Dept. 9135 Newton Center, MA 02459

Firstsource Advantage, LLC Attn: Bankruptcy Dept. 205 Bryant Woods South Buffalo, NY 14228

IC System 444 Highway 96 East, PO Box 64437 Saint Paul, MN 55164-0437

Internal Revenue Service Mail Stop 5010 CHI 230 S. Dearborn Street Chicago, IL 60604

Johnson, Blumberg & Assoc. 230 W. Monroe, Suite 1125 Chicago, IL 60606

LCA Collections PO Box 2240 Burlington, NC 27216 Leone Dermatology Center 3060 N. Arlington Heights Rd. Arlington Heights, IL 60004

Massage Envy 728 E Dundee Rd. Palatine, IL 60074

Medco Financial Assoc. Attn: Bankruptcy Dept. PO Box 525 Gurnee, IL 60031-0525

Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108

MiraMed Revenue Group, LLC Dept 77304 PO Box 77000 Detroit, MI 48277-0304

Navient PO Box 9500 Wilkes Barre, PA 18773

NCO Fin/99 PO Box 15630 Wilmington, DE 19850

Northland Group, Inc. PO Box 390905 Mail Code F2B64 Minneapolis, MN 55439

Northwest Community Hospital 800 W. Central Rd. Arlington Heights, IL 60005

Springleaf Financial Services PO Box 59 Evansville, IN 47701 SYNCB/Amazon PO Box 965015 Orlando, FL 32896

Take Care Health Systems 1901 E. Voorhees Danville, IL 61832

US Bank National Trust Association 300 E. Delaware Ave., 8th Floor Wilmington, DE 19809

Womancare PC PO Box 4543 Carol Stream, IL 60197